

AUG. 15. 2005 9:02PM

**RECEIVED
CENTRAL FAX CENTER**

NO. 353 P. 3

AUG 15 2005

PTO/SB/22 (10-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 70015990-0037-017																				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">In re Application of</td> <td colspan="2">Martin Sperber et al.</td> </tr> <tr> <td>Application Number</td> <td>09/851,371</td> <td>Filed May 7, 2001</td> </tr> <tr> <td>For</td> <td colspan="2">BI-DIRECTIONAL ACCESS POINT</td> </tr> <tr> <td>Group Art Unit</td> <td colspan="2">2817</td> </tr> </table>			In re Application of	Martin Sperber et al.		Application Number	09/851,371	Filed May 7, 2001	For	BI-DIRECTIONAL ACCESS POINT		Group Art Unit	2817									
In re Application of	Martin Sperber et al.																					
Application Number	09/851,371	Filed May 7, 2001																				
For	BI-DIRECTIONAL ACCESS POINT																					
Group Art Unit	2817																					
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a Response to Office Action in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired:)</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$ 1020.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown Above is reduced by one-half, and the resulting fee is \$55.00. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. From PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this Application to Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1126. I have enclosed a duplicate copy of this sheet. </p> <p>I am the</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> applicant/inventor</td> <td></td> </tr> <tr> <td><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> attorney or agent of record.</td> <td></td> </tr> <tr> <td><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</td> <td>Registration number if acting under 37 CFR 1.34(a) _____</td> </tr> </table> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on Form PTO-2038.</p> <table style="width:100%;"> <tr> <td style="width:50%; text-align: center;"> <u>August 15, 2005</u> Date (CUSTOMER #) 26263 </td> <td style="width:50%; text-align: center;"> _____ Signature R. Scott Kimsey Typed or printed name </td> </tr> </table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below.</p> <p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 1020.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	<input type="checkbox"/> applicant/inventor		<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.		<input checked="" type="checkbox"/> attorney or agent of record.		<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).	Registration number if acting under 37 CFR 1.34(a) _____	<u>August 15, 2005</u> Date (CUSTOMER #) 26263	_____ Signature R. Scott Kimsey Typed or printed name
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____																					
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____																					
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 1020.00																					
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____																					
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____																					
<input type="checkbox"/> applicant/inventor																						
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.																						
<input checked="" type="checkbox"/> attorney or agent of record.																						
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).	Registration number if acting under 37 CFR 1.34(a) _____																					
<u>August 15, 2005</u> Date (CUSTOMER #) 26263	_____ Signature R. Scott Kimsey Typed or printed name																					

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231.